

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEES DETERMINATION | NJ | 71584 | 04-12-99 |
| O.I.P.E. CLASSIFIER | | 48 | 4/14/99 |
| FORMALITY REVIEW | | 70611 | 4/12/99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|--------|
| Final | |
| Original | |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here